

Goal

5

All youth have access to structured activities and opportunity for community service and civic participation.

A Shared Vision:

All Massachusetts youth grow up to be **healthy, caring and economically self-sufficient adults.**

“The research is clear. When young people have access to an array of supports and opportunities, they not only avoid engaging in self-destructive lifestyles, but more affirmatively, they achieve the healthy sense of identity and full range of competencies necessary to succeed as adults.” Zeldin, 1995

It is challenging to collect data on asset-based indicators involving youth, particularly so for access to structured activities and opportunities for community service and civic participation. Yet it is a critical area for examination. In particular, there are differences in resources available for structured activities and opportunities for community engagement across the state. Youth from more affluent areas may have an easier time finding after-school activities or ways to be involved in their neighborhoods than youth from communities that are economically struggling. There is also a lack of national data and clearly defined indicators for comparison.

The areas discussed below – out-of-school time programs and community service/service learning, – are key components of Goal 5 for which limited quantitative data are available. We give a sampling of activities available in order to encourage more development in this area.

OUT-OF-SCHOOL TIME PROGRAMS

Structured after-school, before school, weekend, and vacation activities provide young people with the opportunity to use their bodies and minds in positive ways to support one another and their communities.

- In 2001, about half (49%) of Massachusetts high school students reported having taken part in the previous week in after-school or weekend activities, such as school clubs, music, art or drama lessons, church or other supervised activities. Participation was more common among female than male students (54% vs. 45%). There were no significant differences by race/ethnicity or grade (MYRBS, 2001).

EXAMPLES OF OUT-OF-SCHOOL-TIME PROGRAMS

There are many out-of-school-time programs working with youth in Massachusetts. Three examples that can be found in many communities across the Commonwealth are Girl Scouts, Boys and Girls Clubs, and Boy Scouts:

Girl Scouts

“Girl Scouts of the USA is the world’s pre-eminent organization dedicated solely to girls — all girls — where, in an accepting and nurturing environment, girls build character and skills for success in the real world. In partnership with committed adult volunteers, Girl Scouts cultivate their full individual potential. The qualities they develop in Girl Scouting — leadership, values, social conscience, and conviction about their own self-worth — serve them all their lives.” Girl Scouts, 2000

- There are six Girl Scout Councils in Massachusetts. In 2000, 79,202 girls ages 5-17 and 23,184 girls ages 18 and older participated in the Girl Scouts (Girl Scouts, 2000).

Boys and Girls Clubs

“Club programs and services promote and enhance the development of boys and girls by instilling a sense of competence, usefulness, belonging and influence. Boys & Girls Clubs are a safe place to learn and grow – all while having fun. It is truly The Positive Place For Kids” - Boys and Girls Club Massachusetts Annual Report 2000.

- There are 40 Boys and Girls Clubs in Massachusetts. In 2000, there were 61,233 registered members ages 6-21, of whom 59% were boys. In addition, there were 98,532 nonmember youth served (Boys and Girls Club Massachusetts, 2000).

Boy Scouts

“The purpose of the Boy Scouts of America, incorporated on February 8, 1910, and chartered by Congress in 1916, is to provide an educational program for boys and young adults to build character, to train in the responsibilities of participating citizenship, and to develop personal fitness.” - Boston Minuteman Council, 2002

- In 2002, 18,000 Boston area boys ages 6 and up participated in the Boy Scouts (Boy Scouts, 2002).

COMMUNITY SERVICE AND SERVICE LEARNING

“Service-learning combines service to the community with student learning in a way that improves both the student and the community... A national study of Learn and Serve America programs suggests that effective service-learning programs improve academic grades, increase attendance in school, and develop personal and social responsibility. Whether the goal is academic improvement, personal development, or both, students learn critical thinking, communication, teamwork, civic responsibility, mathematical reasoning, problem solving, public speaking, vocational skills, computer skills, scientific method, research skills, and analysis.” - Corporation for National and Community Service, 2002

With community service-learning, students learn and develop through active participation in thoughtfully organized service that is integrated into, and enhances, the academic curriculum; is conducted in, and meets the needs of, the community and school; builds and extends school-community partnerships; helps foster citizenship skills of students; and includes structured time for students to reflect on their service experience.

- In 1998, 86% percent of Massachusetts high schools had other opportunities for student volunteer work and 62% had community service learning projects, in which students' academic course work was related to involvement in community projects (MDOE, School Health Education Profile, 1998).
- In 2001, 41% of high school students participated in volunteer work or community service. Female students were more likely than male students to have participated in volunteer work (44% vs. 38%). There were no significant differences by race/ethnicity or grade (MYRBS, 2001).

Massachusetts has many service learning and community service program opportunities for youth in both the private and public sector. Some of the key ones are described below.

VOLUNTARY SECTOR INITIATIVES

Massachusetts Service Alliance

"The Massachusetts Service Alliance, established in 1991, is a private, nonprofit organization that serves as the state commission on community service. Our mission is to generate an ethic of service throughout the Commonwealth by creating and supporting diverse, high quality service and volunteer opportunities for all age groups, resulting in stronger communities and more active citizens." - Massachusetts Service Alliance, 2002

- In 2001, the Massachusetts Service Alliance (MSA), in partnership with MDOE and Learn & Serve America, funded 45 school programs that used community service learning as a method of instruction. MSA also funded 35 after-school service learning programs that engage participants in service that meets a defined community need.
- In 2001, the MSA funded 6 youth councils to conduct youth-led efforts that promote service learning. Each youth council is responsible for setting and evaluating its goals; developing, disseminating, and reviewing grant applications; and awarding mini-grants to youth groups, students, teachers, and youth-serving organizations that plan to conduct service-learning projects.
- Through MSA, the Massachusetts Campus Compact (MACC) awarded 25 grants to colleges and universities in 2001 to create opportunities in which college students work with K-12 students during and after school. These programs included service-learning, work-study, and literacy components.

AmeriCorps

AmeriCorps is a national network of community-based programs that engages Americans ages 17 and older in results-driven service. AmeriCorps members, who must commit for one or two years, earn education awards and can receive a modest living stipend in exchange for their time and service. By participating in AmeriCorps, members can learn new skills, take on challenging responsibilities, and join a national network of people committed to service. About 80 % of the members of AmeriCorps are below the age of 24.

- In 2002, there were 35 AmeriCorps programs across Massachusetts.

Mass Advocates Standing Strong

Mass Advocates Standing Strong (MASS) is a statewide advocacy organization for people with mental retardation and other disabilities with 35 local self-advocacy groups. The mission of MASS is to empower people with mental retardation and other disabilities to stand by one another, to advocate for themselves and others, and to improve their lives. The membership is comprised of a wide range of individuals with varying levels of disabilities and age ranges, including young adults.

STATE AGENCY INITIATIVES

Department of Education: State Student Advisory Council (State SAC)

The State Student Advisory Council (State SAC) is a peer-elected group of students who represent student concerns to the Massachusetts Board of Education. Established by the Massachusetts Legislature in 1971 as one of the first organizations to provide for direct student involvement in statewide educational policy, the State SAC conducts advocacy around student rights, serves as a communication network to disseminate information to secondary school students statewide, and advises the Board of Education on a wide range of educational decisions. The student chairperson of the State SAC serves as a full voting member of the Board.

The State SAC is composed of five regional councils and a state council. Every secondary school must elect two delegates to a regional council, which then elects members to the state council. The regional councils also carry out projects to make changes in local schools.

Executive Office of Public Safety: Student Civil Rights Team Program

The Executive Office of Public Safety, Student Civil Rights Team Program is an innovative interactive program that trains and empowers student peer leaders to exert an influence against hate and harassment in the school environment. The program is coordinated through the Governor's Task Force on Hate Crime (GTFHC).

In 2001-2002, 18 schools were funded to develop teams. Each school team reflects the diversity of its student body. After comprehensive training that includes civil rights and diversity awareness, the program challenges and equips each school's team to design projects tailored to the unique needs and circumstances of their communities. Training exercises also promote critical thinking skills and tolerance.

Department of Public Health: Peer Leadership Programs

The Massachusetts Department of Public Health (MDPH) funds youth programs in different health promotion areas that utilize participatory, peer-leadership models. These include substance abuse, teen pregnancy prevention, HIV/AIDS and tobacco control.

- In fiscal year 2001, the Bureau of Substance Abuse Services funded 40 community-based youth programs with one or more of the following programmatic objectives: youth development, student assistance, court diversion, and street outreach. Using community health workers and peer leaders, these programs reached 40,628 at-risk youth through more than 16,000 activities including information dissemination, education, interactive youth outreach, ongoing groups, workshops, alternative activities and events, mentoring, screening and crisis intervention (MDPH, Bureau of Substance Abuse Services, 2002).

- The Teen Challenge Fund (TCF) in the Bureau of Family and Community Health is a comprehensive teen pregnancy prevention program, with community-based coalitions funded in the 17 communities with the highest teen birth rates. The TCF program provides opportunities for youth to participate and serve in its community coalitions. In 2001, 738 of the 12,334 youth served by the TCF primary pregnancy prevention program served as peer leaders (MDPH, Bureau of Family and Community Health, 2002).
- The HIV/AIDS Bureau funds the Protect Teen Health program, which hires peer leaders to plan and implement local outreach activities focused on youth HIV/AIDS prevention. In fiscal year 2001, 255 peer leaders were involved in Protect Teen Health (MDPH, HIV/AIDS Bureau, 2002).
- The Massachusetts Tobacco Control Program hires peer leaders through its Youth Advocacy Training Institute (YATI) to work as tobacco prevention advocates in their communities. In fiscal year 2002, 240 peer leaders worked in YATI.

Department of Mental Retardation (DMR): Urban Youth Collaborative Program

The Urban Youth Collaborative Program (UYCP) provides opportunities for young adults ages 18-24 from urban communities to seriously consider a career in human services. Participants, who may make either a summer or full-year commitment, work as employees of a local DMR provider agency to assist in expanding the social and recreational activities of people with disabilities. UYCP promotes collaboration among high schools, colleges, human service providers, DMR and minority communities.

- In FY2002, approximately 200 youth ages 18-24 participated in UYCP.

Executive Office of Health and Human Services: Youth Network Team

The Youth Network Team brings together youth from state youth-serving agencies and community organizations, such as the Department of Social Services (DSS) Youth Advisory Board, the DOE Statewide Student Advisory Council, the MDPH peer leadership networks, Roca, Inc., and the Mass Service Alliance, among others. A major accomplishment has been that Youth Network Team members, led by the DSS Youth Advisory Board, helped design the original proposal for a college incentive program for foster and adoptive youth. This became the Foster Child Tuition Grant adopted by the Board of Higher Education and the Massachusetts Legislature, which is a model program for the nation. The Youth Network Team also recently brought together youth from around the state to implement the Teen Dating Violence Media Campaign. (For further information, contact Gina Faigen at gina.faigen@state.ma.us.)

LOCAL YOUTH COUNCIL INITIATIVES

Many communities and organizations across the Commonwealth are using Youth Councils to actively engage youth in program planning, decision-making, peer training, advising, funding, and policy. By contributing to their communities, youth are not only lending their skills, insight and talents, but also are building their own competencies and skills necessary for successful adolescent and adult life. The following are a few of the exemplary youth councils in Massachusetts:

The Holyoke Youth Commission, which is endorsed by the city's mayor, is a diverse group of approximately 20 youth, ages 13-21, that conducts a variety of youth-related activities in Holyoke.

The Commission has organized a youth MCAS forum; co-sponsored two youth summits where youth created a “Youth Vision Map” of their goals for the city; developed an RFP for youth to request funding for youth projects that align with these goals; and organized the city’s first ever Holyoke Youth Day. (For further information, link to <http://www.youthtaskforce.org/>, and go to Holyoke Youth Commission.)

The Lawrence Teen Council, sponsored by the city of Lawrence and the Lawrence Teen Coalition, is comprised of local high school students elected to represent the interests of Lawrence youth. They provide input to local and state political leaders and others on youth-related issues. The Lawrence City Council also uses the Teen Council as an advisory group and hosts its meetings in the City Council chambers. (For further information, link to <http://www.glcac.org/TeenCoalition/challenge.html> and go to Teen Council, or email teencoalition@glcac.org.)

The Cape and Island Youth Congress is a group of representative students from each of the high schools on Cape Cod who work to identify youth-related issues and develop resources, solutions, and creative responses to those issues. The Youth Congress is part of the Barnstable County Sheriff’s Department Youth Program. The Youth Congress has various committees that perform functions ranging from legislation to recreation and it also conducts an annual youth leadership conference. (For further information, link to <http://www.youthcongress.org/>, or email mail@youthcongress.org.)

The New Bedford Mayor’s Youth Council, open to students in grades 7-12, was created to be the eyes, ears and voice of city youth in an advisory capacity to the mayor and city government. The Council, a program of the YWCA of Southeastern Massachusetts in partnership with the New Bedford Human Services Department, assists city officials in the development of community projects from the youth perspective. (For further information, call Pam Pollock, advisor, at 508-999-3255.)

The Springfield Youth Initiative, housed at Springfield Cares, was established as a forum for addressing common issues among youth and youth-serving agencies. Presentation topics include transportation, gay and lesbian youth, and youth worker training. It is housed at Springfield Cares.

Northern Berkshire UNITY (United, Neighboring, Interdependent, Trusted Youth) is a collaboration among the Northern Berkshire Community Coalition and the area’s middle schools and high school. Created in 1994 as a forum for youth to talk about issues of their choice, UNITY promotes youth expression, development, and involvement through discussion, leadership, job training and employment, and the arts. An advisory board of six youth and six adults guides UNITY’s projects. The Inter-School Forum provides forum events for middle school and high school students that allows each age group to talk about social, health, and prevention issues that are most important to them. The CommUNITY Arts Program provides opportunities for youth expression and community involvement through a teen-led coffeehouse (The Grooove), a writing workshop, and a public art program. (For further information, link to <http://www.nbccoalition.org/index.htm> and go to Programs, then UNITY, or email eschmitz@nbccoalition.org.)

Boston's Citywide Strategy for Youth Development builds upon the many successful collaborative programs working to make Boston a safe and hopeful place for all youth. An inter-departmental effort by the Boston Centers for Youth and Families (BCYF), with support from the Boston Public Health Commission, it is designed to disseminate information, strengthen collaborative relationships, generate new resources, and provide opportunities for learning and action. With youth as vital and active members, BCYF conducts an annual youth survey; holds symposiums involving researchers, practitioners, and youth; and sponsors the "Finding the Time" public education campaign to improve parent-teen communication. (For further information, contact Daria Fanelli, Director of Community Capacity-Building and Partnerships, BCYF, 617-635-4920.)

Glossary

Adequate prenatal care

The Index of Adequacy of Prenatal Care (also known as the Kessner Index) has five categories (adequate, intermediate, inadequate, no prenatal care, and unknown), based on the trimester in which prenatal care began and the number of prenatal visits. This classification is adjusted for gestational age to allow for proper classification of premature births. See <http://www.state.ma.us/dph/bfch/ose/tbirth00/tb2000.pdf> for more information.

Asset-based approach

The asset-based approach sees youth and young adults as resources and agents of change, rather than problems to be fixed or passive consumers of services. Further, the asset-based approach identifies assets and resiliency factors youth need to achieve healthy adulthood, and sets the goals as “building assets” rather than “reducing risks.”

Deficit-Focused

Typically public health and youth programs have focused on problems and risk factors for youth and young adults. Programs that are “deficit-focused” are focused on what is wrong with youth and young adults, and what needs to be fixed.

Healthy People 2010

Healthy People 2010 is a set of health objectives for the United States to achieve over the first decade of this century. It can be used by many different people, states, communities, professional organizations, and others to help them develop programs to improve health.

Healthy People 2010 builds on initiatives pursued over the past two decades. The 1979 Surgeon General's Report, Healthy People, and Healthy People 2000: National Health Promotion and Disease Prevention Objectives both established national health objectives and served as the basis for the development of state and community plans. Like its predecessors, Healthy People 2010 was developed through a broad consultation process, built on the best scientific knowledge and designed to measure programs over time.

Massachusetts Comprehensive Assessment System (MCAS)

Implemented in 1998, the MCAS is the Commonwealth's statewide assessment program developed in response to the Education Reform Law of 1993. For more information on the MCAS, please visit the Massachusetts Department of Education's website at <http://www.doe.mass.edu/mcas/>

State Agency Acronyms Used in *A Shared Vision*.

Board of Higher Education (BHE)

Children's Trust Fund (CTF)

Department of Education (DOE)

Department of Employment and Training (DET)

Department of Labor and Workforce Development (DLWD)

Division of Insurance (DOI)
Executive Office of Health and Human Services (EOHHS) and Agencies:
EOPSS: Executive Office of Public Safety
Division of Medical Assistance (DMA)
Department of Mental Health (DMH)
Department of Mental Retardation (DMR)
Department of Public Health (DPH)
Department of Youth Services (DYS)
Department of Social Services (DSS)
Department of Transitional Assistance (DTA)
Health Care Finance and Policy (HCFP)
Mass Office of Refugees and Immigrants (MORI)

Youth Development

There are six main aspects of the youth development approach:

1. The youth development approach is youth centered.
 - The focus is on young people as resources.
 - Youth have the capacity to contribute to their own, and others, learning and development.
2. The youth development approach is founded in meaningful youth participation in ways that impact their development.
 - Youth are engaged at multiple levels of programs, agencies and communities.
 - Adults are trained to work with youth in meaningful ways.
 - Youth should be provided avenues for participation, such as making decisions and contributions, employment, and taking on challenging responsibilities.
3. The youth development approach is asset-based, versus deficit-focused.
 - The approach to working with youth is focused on building strengths and capacities, versus identifying and eliminating deficits and problems.
 - Assets are the strengths, or positive building blocks, that all youth need to succeed
4. The youth development approach focuses on positive youth outcomes.
 - This approach strives for a world where youth are fully prepared to live their lives presently and become fully prepared adults, versus problem-free.
 - Youth fully develop social skills, civic and cultural competencies, positive attitudes toward community and a strong sense of identity.
 - Youth development programs seek to attain program outcomes as well as positive youth outcomes.
5. The youth development approach emphasizes and values caring relationships between youth and adults as a key mechanism for building success in youth and communities.
 - Ongoing caring relationships provide supports for young people.
 - Caring relationships provide guidance, high expectations, and affirmation.
6. The youth development approach involves the whole community.
 - Youth participation and programming are essential elements of healthy communities.

- Healthy communities offer places for young people to go, where they can learn and contribute.
- Youth development professionals are specifically trained to implement the youth development approach.
- Community members participate in the youth development approach as role models and as resources (both active and passive) for developing youth.

“Positive youth development is a process of creating environments that support the social, emotional, spiritual, physical, moral, and cognitive development of young people.” Community Matters, 2000

Technical Notes

HISTORY OF A SHARED VISION

In 1998, the Governor's Adolescent Health Council, composed of appointed community members and agency representatives undertook to examine the status of adolescent health in the Commonwealth. Since then, many people have contributed to the work of *A Shared Vision*. The initial proposal for a Massachusetts Adolescent Health Report was endorsed by the Governor's Adolescent Health Council on June 16, 1998. In the fall of 1999, the Governor's Adolescent Health Council met with then Secretary of Health and Human Services, William O'Leary to discuss the proposal. The Adolescent Health Report Initiative Conference was held April 25, 2000 at the Crowne Plaza Hotel in Worcester. Speakers included Cathy Samples (Governor's Adolescent Health Council), Glenn Daly (Executive Office of Health and Human Services), Steven Ridini (The Medical Foundation), Paula Duncan, Susan Covitz (Consultant) and Larry Finison (The Medical Foundation).

In the summer of 2001 the Governor's Adolescent Health Council partnered with the Youth Development Advisory Council and the National Governor's Association Youth Policy Team to develop the "Shared Vision for Massachusetts Youth" and to use this framework for *A Shared Vision*. The Massachusetts Department of Public Health assumed responsibility for developing the report.

MASSACHUSETTS CENSUS DEFINITIONS

Household

A household includes all the people who occupy a housing unit as their usual place of residence.

Householder

The person, or one of the people, in whose name the home is owned, being bought, or rented.

If there is no such person present, any household member 15 years old and over may serve as the householder for the purposes of the census.

Two types of householders are distinguished: a family householder and a non-family householder. A family householder is a householder living with one or more people related to him or her by birth, marriage, or adoption. The householder and all people in the household related to him are family members. A non-family householder is a householder living

Own Children

A child under 18 years old who is a son or daughter by birth, marriage (a stepchild), or adoption. For 100-percent tabulations, own children consist of all sons/daughters of householders who are under 18 years of age. For sample data, own children consist of sons/daughters of householders who are under 18 years of age and who have never been married, therefore, numbers of own children of householders may be different in these two tabulations.

Related children

Includes all people in a household under the age of 18, regardless of marital status, who are related to the householder. Does not include householder's spouse or foster children, regardless of age.

Other relative

Any household member related to the householder by birth, marriage, or adoption, but not specifically included in any other relationship category. May include grandchildren, parents, in-laws, cousins, or others.

OVERWEIGHT AND OBESITY/ BODY MASS INDEX

The CDC and Surgeon General have used Body Mass Index (BMI) as a measurement of these conditions. An expert panel, convened by the NIH in 1998 utilized BMI to define overweight and obese. Since then BMI has become the standard for diagnosing the two conditions. The BMI has some limitations in that it can over-estimate body fat in people who are very muscular as well as under-estimate body fat in people who have lost muscle mass, such as the elderly. BMI for adult body mass (21 years of age and over) is calculated as follows:

ADULT BMI:

$$\text{BMI} = \frac{\text{Weight (pounds)}}{\text{Height (inches)}^2} \times 703$$

A BMI greater than 30 presents obesity in adults

A BMI between 25 - 29.9 indicates overweight in adults

The BMI calculation for adults differs among children and adolescents 2-20 years old.

"In children and adolescents, overweight has been defined as a sex-and-age-specific BMI at or above the 95th percentile, based on the revised Centers for Disease Control and Prevention (CDC) growth charts...and they plot the BMI-for-age according to sex-specific charts. Neither a separate definition for obesity nor a definition for overweight based on health outcomes or risk factors is defined for children and adolescents." - U.S. Department of Health and Human Services, 2001; p. 6.

How to Interpret BMI for Age in Children and Adolescents

The extremes in BMI-for-age that raise concern in children 2 to 20 years of age:

- Underweight BMI-for-age <5th percentile
 - At risk of overweight BMI-for-age >85th percentile
 - Overweight BMI-for-age >95th percentile
- (<http://www.cdc.gov/nccdphp/dnpa/bmi/bmi-for-age.htm>)

What are the advantages of using BMI-for-age with children from 2 to 20 years?

- BMI-for-age can be used for adolescents beyond puberty.
- BMI in children and adolescents compares well to laboratory measures of body fat.
- BMI is related to health risks.
- Sixty percent of children and teens with a BMI-for-age above the 95th percentile have at least one risk factor while 20% have two or more risk factors for cardiovascular disease.
- Overweight children are likely to become overweight adults.

- The standards used to identify obesity and overweight in children and adolescents agree with standards used to identify overweight and obesity in adults.

EDUCATIONAL OPPORTUNITY DEFINITIONS

The term “academic graduates” refers to students graduating from any academic high school or a comprehensive high school, and may include graduates of vocational programs within comprehensive schools.

The term “vocational graduates” refers to students graduating from any vocational or agricultural school, and does not indicate whether the student completed a Chapter 74 vocational program.

MASSACHUSETTS COMPREHENSIVE ASSESSMENT SYSTEM MCAS DEFINITIONS

For the purpose of computing school, district, and state results, students who were absent from any subject area MCAS test without a medically-documented excuse were assigned the minimum scaled score of 200 and a performance level of Failing for that subject area.

These results include regular education students, students with disabilities and limited English proficient students.

Students in the Class of 2003 are the first class in Massachusetts who are required to earn a competency determination as well as meet local requirements in order to graduate from high school. To earn a competency determination students must pass both the grade 10 MCAS English Language Arts and Mathematics tests by earning a score of Needs Improvement or above. Massachusetts Board of Education policy allows students five total opportunities to take the exams including the initial test in tenth grade and two re-take opportunities each in eleventh and twelfth grade. Students will have a total of 5 testing opportunities before their scheduled graduation date, but will continue to be able to take the test after they leave high school, if necessary.

Results from the first high stakes administration of the test in the spring of 2001 were very positive as compared to the three previous years. On the English exams, 82% of students passed the test, up from 66% in 2000. On math, 75% of students passed the exam, up from 55% in 2000. Students in the Class of 2003 also participated in a re-test in December 2001. Updated numbers that were released by the Department of Education show that a total of 76% of students in the Class of 2003 have passed both the math and English MCAS exams, meaning they have met the state requirement for high school graduation and are eligible for a diploma.

Efforts are now being concentrated on the remaining students who have not passed one or both portions of the exams. The state legislature appropriated \$50 million in Fiscal Year 2002 for school districts to operate extra help programs for those students who have not passed the exams. Additionally, the Department has set up a free on-line tutorial service for all students in the Class of 2003 who have not yet passed the exams. Also, in the districts that have high numbers of students who still need to pass the exam, the Department has paid for real-time on-line tutoring services for those students. The remaining students have three more opportunities to pass the exams.

ADVANCED

Students at this level demonstrate a comprehensive and in-depth understanding of rigorous subject matter, and provide sophisticated solutions to complex problems.

PROFICIENT

Students at this level demonstrate a solid understanding of challenging subject matter and solve a wide variety of problems.

NEEDS IMPROVEMENT

Students at this level demonstrate a partial understanding of subject matter and solve some simple problems.

FAILING

Students at this level demonstrate a minimal understanding of subject matter and do not solve simple problems.

DROPOUT RATES:

Dropout is defined as a student in grade nine through twelve who leaves school prior to graduation for reasons other than a transfer to another school and does not re-enroll before the following October 1. The dropout rate is the number of students who drop out over a one-year period minus the number of returned dropouts, divided by the October 1 enrollment.

HIGHER EDUCATION ENROLLMENT TRENDS

Data show the annual unduplicated enrollment for undergraduate students within the Commonwealth's higher education system. Data in this table do not necessarily report the overall condition of Massachusetts' youth, since the state's higher education system also enrolls students who are out-of-state residents, and because in-state youth may enroll in either private institutions of higher education or out-of-state public and private colleges. Other information from the Board of Higher Education suggests that about 90% of students enrolled in the state's public colleges and universities are residents of the Commonwealth. However, the size of the youth cohort has increased by about 10% between 1990 and 2000, yet public sector higher education enrollments have stayed about the same during the period.

SEXUAL ASSAULT AND DATING VIOLENCE

Sexual assault and dating violence are crosscutting issues, and could be located in several places in *A Shared Vision*. To avoid redundancy, we have placed sexual assault in *Goal 3*, which address safety, and dating violence in *Goal 2*, which addresses relationships.

DATA SOURCES

Annie E. Casey Foundation, KIDS COUNT

KIDS COUNT, a project of the Annie E. Casey Foundation, is a national and state-by-state effort to track the status of children in the U.S. By providing policymakers and citizens with benchmarks of child well-being, KIDS COUNT seeks to enrich local, state, and national discussions concerning ways to secure better futures for all children.

BRFSS

The Massachusetts Behavioral Risk Factor Surveillance System (BRFSS) is a random digit-dial telephone survey of Massachusetts adults 18 and older. In 1999, 7,287 adults participated. All data are weighted, and provide population-based estimate of health among Massachusetts adults. *A Shared Vision* included information from the sub-sample of the 18 to 24 year olds.

For more information contact:

MassCHIP

The Massachusetts Community Health Information Profile (MassCHIP) is a dynamic, user-friendly information service provided by the Massachusetts Department of Public Health that provides free, online access to these and many other health and social indicators. MassCHIP provides community-level data to assess health needs, monitor health status indicators, and evaluate health programs.

MYRBS

The Massachusetts Department of Education in collaboration with the Centers for Disease Control and Prevention (CDC) conducts the Youth Risk Behavior Survey (YRBSS) in randomly selected high schools every other year. It focuses on the major risk behaviors that threaten the health and safety of young people. This anonymous survey includes questions about tobacco use; alcohol and other drug use; sexual behavior that might lead to unintended pregnancy or sexually transmitted disease; dietary behavior; physical activity; and behaviors associated with intentional or unintentional injury. Data from the YRBSS is important for planning health education and prevention programs. For more information, see technical notes or contact Dr. Carol Goodenow at the Massachusetts Department of Education, (cgoodenow@doe.mass.edu.)

MISER

The Massachusetts Institute for Social and Economic Research (MISER) was founded in 1981 by the University of Massachusetts. MISER is an interdisciplinary research institute of the College of Social and Behavioral Sciences. It provides a variety of services to the University, the Commonwealth, and to national and international audiences. MISER's research involves planning, strategy, and forecasting, with a focus on social, economic, and demographic issues.

US Census

Every 10 years the US Census Bureau conducts a complete enumeration, usually of a population, but also of businesses and commercial establishments, farms, governments, and so forth. The last census was conducted in 2000. www.census.gov.